

BUSINESS TAX APPLICATION FOR MULTIPLE YEARS

CITY OF ATLANTA
DEPARTMENT OF FINANCE - BUSINESS TAX DIVISION
55 TRINITY AVENUE, S.W. SUITE 1350
ATLANTA, GA 30303
PHONE 404-330-6270 FAX 404-658-7465

If you have been in business prior to 2005, please indicate each year you have been in business, your gross receipts for each year, and number of employees for each year.

BUSINESS NAME:	BUSINESS TAX NUMBER	TAX CLASS <small>Office Use Only</small>	INDUSTRY CODE <small>Office Use Only</small>
STREET ADDRESS (Physical Location, Apt., Ste., Etc.)	City, State, Zip Code	Telephone # (Area Code)	
Mailing Address (Apt., Ste., Etc)	City, State, Zip Code	Telephone# (Area Code)	
Federal Tax ID Number			

YEAR	ACTUAL GROSS RECEIPTS	NUMBER OF EMPLOYEES
2003		
2004		
2005		
2006		

Complete all of the information including the Certification below. Also indicate the current business and mailing address above.

APPLICANT SIGNATURE_____	PRINTED NAME_____
MONTH_____DAY_____	YEAR_____

For Office Use Only	Return To _____	Date _____
----------------------------	------------------------	-------------------